



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1568

<b>SERIAL NUMBER</b> 09/877,585	<b>FILING DATE</b> 06/08/2001 <b>RULE</b>	<b>CLASS</b> 073	<b>GROUP ART UNIT</b> 2856	<b>ATTORNEY DOCKET NO.</b>
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## APPLICANTS

William Colin Basford, Montpelier, VT;

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLN CLAIMS BENEFIT OF 60/210,325 06/09/2000 \*  
AND CLAIMS BENEFIT OF 60/275,059 03/12/2001  
(\* ) Data inconsistent with PTO records.

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 08/06/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> VT	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 18	<b>INDEXED CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

William C. Basford  
24 Vine Street, Apt. 2  
Montpelier, VT 05602

## TITLE

Apparatus to reduce base drag behind bluff bodies

<b>FILING FEE RECEIVED</b> 395	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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CONFIRMATION NO. 1568

<b>SERIAL NUMBER</b> 09/877,585	<b>FILING DATE</b> 06/08/2001 <b>RULE</b>	<b>CLASS</b> <del>073</del> 226/1780-1	<b>GROUP ART UNIT</b> 3612	<b>ATTORNEY DOCKET NO.</b>
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**APPLICANTS**  
William Colin Basford, Montpelier, VT;

**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLN CLAIMS BENEFIT OF 60/210,325 06/09/2000 \*  
AND CLAIMS BENEFIT OF 60/275,059 03/12/2001 *yes KRP 6-25-02*  
(\*Data provided by applicant is not consistent with PTO records. *PLEASE CHECK AGAIN*)

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
\*\* 08/06/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> VT	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>KRP</i> Initials				

**ADDRESS**  
WILLIAM COLIN BAFORD  
14 HEARTWOOD CIRCLE  
NEWMARKET, NH 03857

**TITLE**  
Apparatus to reduce base drag behind bluff bodies

<b>FILING FEE RECEIVED</b> 395	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit